Wisconsin Department of Regulation & Licensing

Mail To: P.O. Box 8935

Madison, WI 53708-8935

FAX #: (608) 261-7083 **Phone #: (608) 266-0145** 1400 E. Washington Avenue Madison, WI 53703

E-Mail: web@drl.state.wi.us Website: http://www.drl.state.wi.us

PSYCHOLOGY EXAMINING BOARD

ETHICS CONTINUING EDUCATION APPROVAL REQUEST FORM

GENERAL INFORMATION:

Wisconsin Licensed Psychologists and Private Practice School Psychologists are required to document 40 hours of continuing education completed between October 1, 2001 and September 30, 2003.

Continuing education credit is calculated on a "contact hour" basis. So one hour of approved CE activity equals one credit.

No more than 20 credits will be granted for any program. The Board is requiring that 6 hrs. of CE be in the area of ethics.

Only programs related to ethics will be reviewed. All other programs are automatically approved if they meet the requirements of Chapter PSY 4.

Psy 4.02 Continuing education

- (2) APPROVAL OF CONTINUING EDUCATION PROGRAMS. The board shall approve all of the following program and courses:
- (a) Continuing education programs and courses sponsored or co-sponsored by a presenter approved by the committee for the approval of continuing education sponsors of the American psychological association.
- (b) Educational programs recognized as approved at the time of attendance as "category I" continuing medical education programs by the council on medical education of the American medical association or the American osteopathic association.
- (c) Graduate level courses or continuing education courses relevant to the professional practice of psychology offered by accredited colleges and universities.
- (d) Continuing education courses approved by the psychology licensing board in another state where the participant is also licensed.

Allow at least 60 days for the Examining Board to respond to applications for program approval. If the program sponsor has already requested approval it is not necessary to make an individual request.

FOR INDIVIDUALS SEEKING APPROVAL OF ETHICS PROGRAMS <u>NOT YET ATTENDED</u> AND NOT PREVIOUSLY APPROVED BY THE BOARD:

Submit a completed Ethics CE Approval Request Form

- Complete only those items on the form that are marked *
- Attach a copy of the course outline, brochure
- Following the program, keep a copy of your attendance verification (certificate) and the Board Approval on file

FOR INDIVIDUALS SEEKING APPROVAL OF ETHICS PROGRAMS <u>ALREADY ATTENDED</u> AND NOT PREVIOUSLY APPROVED BY THE BOARD:

Submit a completed Ethics CE Approval Request Form promptly, no more than 6 months after the program.

- Complete only those items on the form that are marked *
- Attach a copy of the course outline and brochure
- Keep a copy of your attendance verification (certificate) on file

FOR SPONSORING ORGANIZATIONS SEEKING APPROVAL OF ETHICS PROGRAMS:

Submit a completed Ethics CE Approval Request Form

- Attach a copy of the course outline or brochure
- Attach a copy of the presenters' qualifications or vitae
- Determine method that attendance will be monitored during the program
- Submit a copy of the Program Evaluation form
- Following the program, provide verification of attendance and notification of status of Board approval to program participant

#1823 (Rev. 7/03) Ch. 455, Stats.

Wisconsin Department of Regulation & Licensing Mail To: P.O. Box 8935 Madison, WI 53708-8935 Madison, WI 53708-8935 Madison, WI 53703

(608) 261-7083 (**608**) **266-0145** FAX #: Phone #:

E-Mail: web@drl.state.wi.us Website: http://www.drl.state.wi.us

PSYCHOLOGY EXAMINING BOARD

ETHICS CONTINUING EDUCATION APPROVAL REQUEST FORM

Re	Requested by: Date	
(na	(name and address)	
*	Sponsoring Organization radices	
	Telephone No. & Contact Person	
*	* COURSE TITLE	
*	* Method of Presentation – Lecture, Home Study, Case Study, Tests, Video, Written Materials,	etc
*	* Relevance to Own Practice	
*	* Educational Objectives	
*	* Intended Audience	
*	* Instructor/Lecturer(s)	
*	* Location(s)	
*	* Date(s)	
*	* Name of Attendance Officer	
*	* Method of Attendance Verification & Program Evaluation	
*	Tiense III III biochare, course outline, i resenters buckground and Quantications.	
*	* # of CE Hours Requested NUMBER OF HOURS COURSE NOT APPROVED NUMBER OF HOURS	(Maximum of 20 hours)
	Board Member	Date

#1803 (Rev. 7/03) PSY4, Wis. Adm. Code